

Snohomish County Residential Treatment Facility Safety Fact Sheet

Background

Aligning with the governor's 2018 proclamation to provide more accessible, complete mental and behavioral health care, Washington's Health Care Authority is overseeing the inaugural implementation of a new residential treatment facility, a 16-bed recovery center financed in part by the Tulalip Tribes of Washington to serve residents of Snohomish County and Tulalip tribal lands. A settlement between the State of Washington, Tulalip Tribes of Washington, and Snohomish County stipulates that the Tribes will invest \$35 million in a civil commitment facility of 48 beds or less. The Health Care Authority will hire a behavioral health provider to run the facility. The facility is tentatively scheduled to open in 2024.

This residential treatment facility will offer long-term psychiatric and behavioral health care in a setting that is closer to individuals' homes and more integrated into the community. Individuals enrolled in the 90-day or 180-day recovery program will receive care 24 hours a day.

Individuals admitted to the facility are not involved in the criminal justice system. Rather, the individuals will be Washington State residents, including some from Snohomish County, who are civilly committed under Washington's Involuntary Treatment Act.

This healthcare facility is intended to be a therapeutic space that promotes healing and well-being. It is important that individuals at the facility feel safe and comfortable in order to receive the most benefit from treatment. The facility has been designed to include therapeutic elements that incorporate nature, creativity, and a sense of serenity. Individual rights are emphasized in building construction and treatment including ones right to confidentiality, dignity, and identity.

Individual Rights

What rights do individuals admitted to this facility have?

Individuals within this facility have rights according to WAC 246-337-075 and RCW 71.05. Individuals have the right to maintain their identity, humanity, and dignity. This can include the wearing personal clothing, visiting / calling family or friends, being an active participant in their treatment, making informed decisions about their treatment, and refusing medications. Individuals also have the right to confidentiality and privacy regarding their treatment and personal information.

Safety

The facility will be secure and will have multilevel lock functions, trained health care providers, onsite security personnel, and security cameras. These features are necessary to ensure all individuals remain safely in the care of the treatment team during their time of healing.

What does it mean that this is a secure facility?

Individuals who are receiving treatment under the Involuntary Treatment Act will not be able to leave the facility without staff escort. The facility will be secure and locked.

Individuals receiving treatment here may be unable to plan for or maintain their health and safety. It is important to understand that people living with serious mental illness are far more likely to be victims of crime than perpetrators.

How will individual safety be prioritized within this facility?

Individual safety is a top priority within this facility. Individuals who are receiving behavioral health care services at this facility will be treated with dignity and respect, including the use of individual choice to ensure the treatment is as therapeutic as possible. In order to promote healing the individual must feel safe in the facility.

In addition, individuals have the right to wear personal clothing and have visitors. Individuals also have the right to refuse to wear uniforms that would identify them as an individual of the facility.

How will individual's physical healthcare needs be met?

Prior to admission, individuals receive a medical assessment completed by a licensed physician to ensure that all serious physical healthcare concerns are addressed. The facility will provide ongoing monitoring of physical health symptoms to include vital signs. The facility will also provide access to a physical health care provider to address non-emergent medical needs.

How will a safe environment in the facility be achieved?

- As a healthcare facility, all Health Insurance Portability and Accountability Act (HIPAA) protocol for individual protection will be implemented and scrupulously followed.
- Individuals can move about freely about the facility and will be allowed discharge upon satisfactory completion of their treatment, or by order of the court.
- All exterior doors are locked. The outdoor areas are fenced to ensure individual safety. Individuals have the right to visitors, however, visits are limited and monitored as needed.
- The facility is staffed 24 hours a day, 7 days a week.
- The building interior has clear sightlines without any hidden corners.
- A safe room exists should any individual need to be removed and managed to maintain the safety of themselves and others.
- Common areas have extra width to individuals to move freely without restriction.
- At the main entry and exit points there is a sally-port. The sally-port functions as a secure vestibule where there are two doors in a series, and they are programmed so that both doors cannot be open at the same time.
- Individuals will be active participants in crisis planning to identify, manage, and reduce symptoms.
- Common areas have been constructed with safety in mind to minimize harm to oneself due to behavioral health symptoms. For example, fixtures are anti-ligature, windows are outfitted with half-inch-thick impact-resistant windowpanes, other areas are outfitted with security glazing, and mirrors are shatterproof.

What does the word “elope” mean in the context of a secure behavioral health facility?

The word “elope” in the context of a secure behavioral health facility is to leave the secure portion of the facility without authorization. It is extremely rare that there would be an elopement. Data has demonstrated that elopements are most likely to occur at a third-party location external to the secure facility- such as at an Emergency Department.

What happens if an individual elopes?

If an individual leaves the facility without authorization the facility staff will assess the situation and determine whether disclosing the elopement and information about the individual is necessary and permitted under Washington's mental health services law. This law strikes a balance between the individual's legal right to privacy and disclosures to certain parties. An individual's right to privacy limits the circumstances in which third-parties can be notified. The scenarios below explain the types of disclosures that can be made under RCW 70.02.230

- Scenario No. 1: Disclosures can be made to appropriate law enforcement agencies and to a person, when the identity of the person is known and that person's health and safety have been threatened by the individual, or the person is known to have previously been repeatedly harassed by the individual.
- Scenario No. 2: Disclosures can be made to appropriate corrections and law enforcement agencies in the event of a crisis or emergent situation that poses a significant and imminent risk to the public.
- Scenario No. 3: Disclosures can be made to the individual's relatives and the department of corrections when the person is under the supervision of the department, and governmental law enforcement agencies designated by the physician or psychiatric advanced registered nurse practitioner in charge of the individual or the professional person in charge of the facility, or his or her professional designee when necessary for the protection of the individual or others.

In each of these scenarios, there is no obligation for the facility to directly notify homeowners or the members of the community at large—those notifications will be handled by law enforcement when necessary. Procedures will be developed with law enforcement to address this situation.

When is seclusion and restraint necessary in this type of facility?

Seclusion, physical restraint, and pharmacological restraint methods are governed by WAC 246-337. Seclusion and restraint methods are employed strictly for the emergent safety of an individual who has become at imminent risk of danger due to their behavioral health symptoms. This method of ensuring individual and staff safety is a last resort as it has potential to also be traumatic for the individual and staff involved. Less restrictive options will also be explored before this kind of intervention is deployed. These interventions are uncommon and require a licensed provider order to carry out. The facility will include a seclusion area and a restraint bed for these rare occurrences.

How is individual discharge handled?

The treatment team at the facility will work with the individuals to create individualized discharge plans to ensure their needs are met in their community. Discharge plans include linkages with outpatient counseling, medication management, case management, coordination of benefits and medical care, as well as housing supports, when needed. The court may also be involved to order less restrictive conditions of treatment. The treatment team, managed care hospital liaisons, and peer bridgers work with discharging individuals and their loved ones to help ensure a well-coordinated handoff to a pre-arranged housing location, typically in their home county. The discharge plan includes transportation to their home.